

**UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF NORTH CAROLINA**

| | | |
|---------------|---|------------------|
| |) | |
| |) | |
| Plaintiff(s), |) | |
| |) | Case No.: |
| vs. |) | |
| |) | |
| |) | |
| Defendant(s). |) | |

**DISCLOSURE OF CORPORATE, AFFILIATIONS AND OTHER
ENTITIES WITH A DIRECT FINANCIAL INTEREST IN LITIGATION**

PLEASE COMPLETE ONLY ONE FORM FOR EACH NON-GOVERNMENTAL CORPORATE PARTY. COUNSEL HAVE A CONTINUING DUTY TO UPDATE THIS INFORMATION. PLEASE FILE AN ORIGINAL AND ONE COPY OF THIS FORM. PLAINTIFF OR MOVING PARTY MUST SERVE THIS FORM ON THE DEFENDANT(S) OR RESPONDENT(S) WHEN INITIAL SERVICE IS MADE.

Federation of State

Medical Boards who is _____,
(Name of Party) (Plaintiff/moving party or defendant)

makes the following disclosure:

1. Is party a publicly held corporation or other publicly held entity?

() Yes () No

2. Does party have any parent corporations?

() Yes () No

If yes, identify all parent corporations, including grandparent and great-grandparent corporations: _____

3. Is 10% or more of the stock of a party owned by a publicly held corporation or other publicly held entity?

☐ Yes

☐ No

If yes, identify all such owners: _____

4. Is there any other publicly held corporation or other publicly held entity that has a direct financial interest in the outcome of the litigation?

☐ Yes

☐ No

If yes, identify entity and nature of interest: _____

(Signature)

(Date)